## APPLICATION FOR EMPLOYMENT

Snyderville Basin Water Reclamation District 2800 Homestead Road, Park City, Utah 84098 (435) 649-7993 or FAX (435) 649-8040

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, or veteran status.

1. PERSONAL INFORMATION				
Name:	Date:			
Address:				
	(City)	(State)	(Zip Coo	de)
Telephone Number(s):				
2. WORK PREFERENCE				
Kind of work desired:	Salary or	pay you expect	:	
Describe your prior experience in the kin	d of work that you want	:		
Describe any formal schooling or training	g you have for this work	:		
List any licenses, security or bonding clea	arance, or certificates tha	at you have:		
List any office skills that you have (typin	g, machine operation, co	omputer progran	ns):	
Referral source: Friend Rel	ative Advertisem	ent Wal	k-In	
Website Other (please state	)			
3. AVAILABILITY FOR WORK				
Date available for work:				
Full time Part time Ten				
Will you work overtime if necessary?			Yes	No
Will you work extra days in the week, if	•			No
Do you want to work elsewhere or attend	l school while working h	ere?	Yes 1	No

Do you have any continuing military obligations, such as the Guard or Reserves, which may affect your work schedule?	Yes	No
4. PRESENT EMPLOYMENT		
Are you presently employed?	Yes	No
Are you presently employed?  Do you authorize us to contact your present employer as a reference?  How much advance notice do you wish to give to your present employer?	Yes	No
5. PERSONAL HEALTH		
If offered a position with Snyderville Basin Water Reclamation District, yo be conditioned upon the results of a medical examination, drug tests, and/or ability tests.		•
6. PRIOR EVENTS		
Have you ever worked for this agency before?	Yes	No
Have you ever worked for this agency before?  Do you authorize us to contact your previous employer(s) for references?	Yes	No
Have you ever been terminated by a previous employer(s)?  Have you ever been convicted of a felony?	Yes	No
Please list any friends or relatives working for Snyderville Basin Water Rec	res lamation Dis	NO trict:
Troube list any mends of relatives working for shydervine Basin water Rees		uncu.
7. EDUCATION AND TRAINING		
High School		
Name and address of last high school attended:		
Date last attended:		
Years completed:		
	Yes	No
College or University		
Name and address of last college or university attended:		
Date last attended:		
Date last attended: What was your major/course of study?		
Did you graduate?	Yes	No
Years completed: Associate Bachelors Mas	, ,	
what degree did you receive? Associate Bachelors Mas	ters D	octorate
Other Schools (Trade, Correspondence, etc.)		
Name and address of school attended:		

Date last attended:			
What was your course of study?			
Did you graduate?		Yes	No
What degree did you receive?			
8. EMPLOYMENT HISTORY			
Present employer:	Supervisor:		
Address:			
Dates of employment: From			
Job title:			
Main duties:			
Wages or Salary: Starting	Ending:		
Reason(s) for leaving:			
Previous employer:	Supervisor:		
Address:			
Dates of employment: From			
Job title:			
Main duties:	<u>-</u> <u>-</u>		
Wages or Salary: Starting			
Reason(s) for leaving:			
Next Previous employer:			
Address:			
Dates of employment: From			
Job title:			
Main duties:			
Wages or Salary: Starting			
Reason(s) for leaving:			
9. REFERENCES			
1			
Name	Telephone #		
Address			
2			
Name	Telephone #		
Address			
3			
Name	Telephone #		
Address			

## 10. CERTIFICATE OF APPLICATION

All information on this form is true and correct to the best of my knowledge. I understand that any omission or misrepresentation of information may cause my application to be rejected or, if I am hired, may cause my employment to be terminated. I authorize any employer accepting this application and any person, organization, former employer, or other entity listed in this application to ask or answer any and all questions about me, and I agree not to sue and to hold harmless any person or entity that provides information or expresses an opinion about me or my performance. I understand that this document is an application for employment and not an offer to employ me. I understand that if I am employed, my employer may terminate me at any time without reason or explanation. If hired, I agree to protect the confidentiality of any confidential information I obtain as a consequence of my employment. If hired, I agree that the value of any advance payment, property issued to me, or other debt I owe my employer shall be due upon termination of my employment and may be deducted from wages or other payments owed to me at the time of my termination of employment.

Signature of Applicant	Printed Name of Applicant	Date	